## Indiana State Police Methamphetamine Laboratory Occurrence Report This form complies with the statutory requirement set forth in IC 5-2-15-3.

Date:	<u>6-2-2009</u>	Address:	N38*15.56 <u>'085"/W87*77.94'</u>
Case #:	35F2917A		Wadesville, In
County:	<u>Posey</u>		<u>47638</u>
Type of Laboratory Scizure (check one)		Seiznre Location (check all that apply)	
<ul> <li>☑ Operational Lab</li> <li>☐ Chemical/Glassware/Equipment (only)</li> <li>☐ Dumpsite (only)</li> </ul>		Residence Outbuilding Vehicle	☐ Hotel/Motel ☐ Open – No Structure ☐ Other:
Items Found: Location (bedroom, kitchen, open air, etc) (check all that apply)  Lithium/Ammonia Reaction(s):			
Rcd Phosphorous/Iodine Reaction(s):			
Flammable Solvents;			
Water Reactive Mctal (Lithium):			
Anhydrous Ammonia:			
Hydrochloric Acid Gas Generator(s):			
Corrosive Acid:			
Corrosive Basc:			
Other (item and location):			
Child under age 18 discovered (check one)  Yes (number present)  No *If yes, fax report to Child Protective Services		Investigative Information  Ephedrine/Pseudocphedrine Tracking Log Retail/Merchant Tip  Other:	
This report is to be faxed to the following agencies that serve the location:			
<u> </u>		Fax: 812-	
Health Department: Posey County Health Dept		Fax: <u>812-8</u> Fax:	
Child Prote	ection Service: N/A		
For further information regarding this methamphetamine laboratory, contact Investigating Officer: K. Rose Phone 812-307-0047			
** This form is to be faxed to the Fire Department, Health Department and/or Child Protective Services Department			

listed within 24 hours of scene processing.

This form is to be included with the case file, and a copy sent to the Claudestine Laboratory Team Leader for retention.